Approved for use through 06/30/2010. OMB 0651-0032

Under the Paperwork Reduct	ion Act of 1995	no persons are required	i to res	U.S. Patent pond to a collection	and Trac of infom	emark Offic nation unles	e; U.S. DEF s it displays	ARTMENT OF COMMERCE a valid OMB control number	
Effec		Complete if Known							
FEE TRANSMITTAL For FY 2009				Application Number 10/8		10/584,41	1	Conf. No.: 9411	
				Filing Date F		February 0	2, 2007		
				First Named Inventor A		Akio FUNA	Æ		
		Examiner Name B. S.		B. SAFAIF	OUR				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	2618				
TOTAL AMOUNT OF PAY	MENT (\$	130.00		Attorney Docket	No.	0757-0316	PUS1		
METHOD OF PAYMEN	T (check al	I that apply)							
Check Credit			None	Other (p	lease ide	ntify):			
Deposit Account	Deposit Accour	t Number: 02-2448		Deposit Ac	count Na	me:			
For the above-ident	ified deposit	account, the Director is	s here	by authorized to:	(check	all that ap	oly)		
✓ Charge fee(s)) indicated be	elow		Charge	e fee(s)	indicated I	oelow, exc	ept for the filing fee	
Charge any a	additional fee	(s) or underpayments	of fee	~ = ·		rpayment			
under 37 CF WARNING: Information on thi	R 1.16 and 1	.17		· · · ·				nuldo oradit card	
nformation and authorization	on PTO-2038		ru iiiio	rilladon snodio no	A De IIIC	udeu on u	is ioiiii. Fit	ovide credit card	
FEE CALCULATION									
1. BASIC FILING, SEA	RCH, AND	EXAMINATION FEI	ES						
FILING FEES SEARCH FEES EXAMINA Small Entity Small Entity S							FION FEES mail Entity		
Application Type	Fee (\$)		ee (\$)	Small Entity Fee (\$)	Fee	(\$) Fee		Fees Paid (\$)	
Utility	330	165 5	40	270	220	11	0		
Design	220	110 1	00	50	140	7	0		
Plant	220	110 3	30	165	170	8	5		
Reissue	330	165 5	40	270	650	32	5		
Provisional	220	110	0	0	0		0		
2. EXCESS CLAIM FE	ES							Small Entity	
Fee Description							ee (\$) 52	Fee (\$) 26	
Each claim over 20 (including Reissues)							220	26 110	
Each independent claim over 3 (including Reissues)							220 390	195	
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$)								pendent Claims	
- 20 or HP =	0	112 Leg (4)		0.00			ee (\$)	Fee Paid (\$)	
HP = highest number of tota	I claims paid fo					-		1001000	
Indep. Claims	Extra Clair			Paid (\$)		_			
- 3 or HP = HP = highest number of inde	nendent claim	x paid for if greater than 3		0.00					
B. APPLICATION SIZE		paid for, it greater trian t	٥.						
If the specification and	drawings								
		, the application siz				small en	tity) for o	each additional 50	
sheets or fraction to Total Sheets	extra She	35 U.S.C. 41(a)(1)	(G) a feach	md 37 CFR 1.1 additional 50 o	6(s). r fractic	n thereof	Fee (\$) Fee Paid (\$)	
- 100 =	0	/ 50 = 0		(round up to a w			, 561	= 0.00	
4. OTHER FEE(S) Non-English Specification. \$130 fee (no small entity discount)								Fees Paid (\$)	
Other (e.g., late filing surcharge): One Month Extension of Time								130.00	
UBMITTED BY			_						
gnature	1/2	12-48517	F	Registration No. 2	9680		Telephon	e 703-205-8000	
ame (Print/Type) Michael K. Mutter Date August								nust 17, 2010	

This polarism of information is required by 27 FEF 1.186. The information is required to below or retain a benefit by the public which is to life (part by the DEFF) of the public properties of the